

2019 CHAUTAUQUA COUNTY FAIR

PIE EATING CONTEST RULES

- **Entries are limited to the first 10 contestants to register.**
- **Registration begins at 6:15 PM at the pavilion.**
- Contestants must be 18 years of age or older.
- The contest pies will be pies purchased from the local grocery store.
- **NO HANDS MAY BE USED. Contestants must place their hands behind their backs while eating the pie.**
- A contestant may not leave the table for any reason during the contest.
- Any visible signs of sickness will cause disqualification.
- Contestants may not knock the pie onto the ground.
- The pie must be consumed. It may not be spit out.
- Contestants must not touch/eat any pie until the start signal is given.
- The first person to finish his/her pie and stand upright will end the contest and be declared the winner. Judges will decide if pie is actually finished before ending the contest.
- In the event of a tie – whichever one of the tied contestants who, in the opinion of the judges, ends up wearing the least amount of pie and the biggest smile will be declared the overall winner.
- **A waiver MUST be signed by each contestant prior to the contest.**

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PIE EATING CONTEST WAIVER

I hereby agree, acknowledge, and accept the following and am registering for the Chautauqua County Fair Pie Eating Contest and am 18 years of age or older:

I know that eating a pie at a fast rate of speed is potentially a hazardous and uncomfortable activity. I should not enter and eat unless I am medically able to abide by any decision of the contest officials and abide by any and all contest rules. I assume all risk associated with eating in the event including, but not limited to, indigestion, stretched stomach, contact with other contestants, a general dislike of pie when done, and all such risks being known and appreciated by me.

Having read this waiver and knowing these facts and in consideration of the Chautauqua County Fair accepting my entry, I, for myself and anyone entitled to act on my behalf, waive, and release the Chautauqua County Fair Association, Inc. and any volunteers and sponsors from all claims on liabilities of any kind arising from participation in this event. I also understand that the above is also related to any food allergies, that I hold harmless the Chautauqua County Fair Association, Inc. and any volunteers or sponsors from all claims of liability of any kind.

By signing below, I certify that the information provided on this entry form is correct and that I have carefully read, understand, and accept the terms of the contest. My signature indicates my understanding and assumption of any and all risk and that my participation is voluntary in this contest. I also authorize pictures and photographs of myself to be used in the promotion of this event and future events.

Contestant's Signature: _____

Contestant's Printed Name: _____

Date: _____ **Time:** _____

Witness Signature: _____

Witness Printed Name: _____

**2019 CHAUTAUQUA COUNTY FAIR
PIE EATING CONTEST ENTRY FORM**

Name: _____

Address: _____

Phone Number: _____

Email: _____

Emergency Contact Name: _____

Emergency Contact Number: _____

Do you have any known food allergies? _____

If so, please list: _____

**ALL CONTESTANTS
MUST READ & SIGN WAIVER
ON BACK OF THE ENTRY FORM**